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W.R. Grace & Co.-Conn.
Patent Dept.
7500 Grace Drive
Columbia, MD 21044

AMENDMENT TRANSMITTAL FORM

Attorney Docket No. W-9459-02

In re application of: **Kneg-Yu Shih**

Serial No.

Filed: **August 4, 2003**

Group Art Unit: Examiner:

For: **ACTIVE HETEROGENEOUS BI- OR TRI- DENTATE LIGAND/TRANSITION METAL CATALYST**

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Transmitted herewith is an amendment/response in the above-identified application.

NO ADDITIONAL FEE IS REQUIRED.
 The fee for any changes in number of claims has been calculated below:

CLAIMS AS AMENDED						
(1)	(2) Claims Remaining After Amendment	(3)	(4) Highest No. Previously Paid For	(5) Present Extra	(6) Rate	Additional Fee
Total Claims	207	Minus	**161	*46	\$18.00	\$ 828.00
Indep. Claims	3	Minus	***3	*0	\$80.00	\$ 0.00
			****For Multiple Dependent Claims Add:		\$270.00	\$
					TOTAL FEE DUE:	\$ 828.00

*If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.

**If the "Highest Number Previously Paid for" IN THIS SPACE is less than 20, write "20" in this space.

***If the "Highest Number Previously Paid for" IN THIS SPACE is less than 3, write "3" in this space.

****Multiple Dependent Claim fee is only paid once.

Please charge **\$828.00** to Deposit Account No. **07-1770**.
 Two extra copies of this sheet are enclosed.

The Commissioner is hereby authorized to charge any additional fees under
 37 CFR 1.16 and 1.17 which may be required, or credit any overpayment,
 to Deposit Account No. **07-1770**. **Two extra copies of this form are enclosed.**

Aug 4, 2003
Date of Signature

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Product Code: DAV-POLY